

CAPELIDE COVE GOOD SAMARITAN CENTER
23926 FOURTH AVE S

SIREN 54872 Phone: (715) 349-2292
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/04): 86
Total Licensed Bed Capacity (12/31/04): 86
Number of Residents on 12/31/04: 71

Ownership: Nonprofit Church/Corporation
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 76

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		19.7
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		45.1
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	1.4	More Than 4 Years		35.2
Day Services	No	Mental Illness (Org./Psy)	33.8	65 - 74	7.0			-----
Respite Care	No	Mental Illness (Other)	12.7	75 - 84	29.6			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	52.1	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	9.9	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	14.1	65 & Over	98.6	-----		
Transportation	Yes	Cerebrovascular	8.5		-----	RNs		14.0
Referral Service	No	Diabetes	14.1	Gender	%	LPNs		1.3
Other Services	No	Respiratory	2.8		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	14.1	Male	31.0	Aides, & Orderlies		
Mentally Ill	Yes	-----	-----	Female	69.0			
Provide Day Programming for		100.0	-----		-----			
Developmentally Disabled	No		100.0		100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total	%
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Resi- dents	Of All
Int. Skilled Care	0	0.0	0	1	1.9	133	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	1	1.4
Skilled Care	3	100.0	303	47	87.0	114	0	0.0	0	13	100.0	145	0	0.0	0	0	0.0	63	88.7
Intermediate	---	---	---	6	11.1	95	1	100.0	140	0	0.0	0	0	0.0	0	0	0.0	7	9.9
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	3	100.0		54	100.0		1	100.0		13	100.0		0	0.0		0	0.0	71	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
		-----			-----	
Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	7.0	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	7.0	Bathing	1.4	74.6	23.9	71
Other Nursing Homes	3.5	Dressing	18.3	57.7	23.9	71
Acute Care Hospitals	80.7	Transferring	32.4	45.1	22.5	71
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	29.6	46.5	23.9	71
Rehabilitation Hospitals	0.0	Eating	73.2	19.7	7.0	71
Other Locations	1.8	*****				
Total Number of Admissions	57	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	2.8		Receiving Respiratory Care	11.3
Private Home/No Home Health	22.5	Occ/Freq. Incontinent of Bladder	54.9		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	25.4	Occ/Freq. Incontinent of Bowel	32.4		Receiving Suctioning	7.0
Other Nursing Homes	8.5				Receiving Ostomy Care	1.4
Acute Care Hospitals	4.2	Mobility			Receiving Tube Feeding	1.4
Psych. Hosp.-MR/DD Facilities	1.4	Physically Restrained	4.2		Receiving Mechanically Altered Diets	23.9
Rehabilitation Hospitals	1.4					
Other Locations	1.4	Skin Care			Other Resident Characteristics	
Deaths	35.2	With Pressure Sores	1.4		Have Advance Directives	74.6
Total Number of Discharges		With Rashes	0.0		Medications	
(Including Deaths)	71				Receiving Psychoactive Drugs	63.4

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit Peer %	Group Ratio	Bed Size: 50-99 Peer %	Group Ratio	Licensure: Skilled Peer %	Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	84.9	87.4	0.97	85.5	0.99	85.9	0.99	88.8	0.96
Current Residents from In-County	60.6	76.6	0.79	71.5	0.85	75.1	0.81	77.4	0.78
Admissions from In-County, Still Residing	15.8	21.5	0.73	20.7	0.76	20.5	0.77	19.4	0.81
Admissions/Average Daily Census	75.0	125.9	0.60	125.2	0.60	132.0	0.57	146.5	0.51
Discharges/Average Daily Census	93.4	124.5	0.75	123.1	0.76	131.4	0.71	148.0	0.63
Discharges To Private Residence/Average Daily Census	44.7	51.0	0.88	55.7	0.80	61.0	0.73	66.9	0.67
Residents Receiving Skilled Care	90.1	95.2	0.95	95.8	0.94	95.8	0.94	89.9	1.00
Residents Aged 65 and Older	98.6	96.2	1.02	93.1	1.06	93.2	1.06	87.9	1.12
Title 19 (Medicaid) Funded Residents	76.1	69.6	1.09	69.1	1.10	70.0	1.09	66.1	1.15
Private Pay Funded Residents	18.3	21.4	0.85	20.2	0.91	18.5	0.99	20.6	0.89
Developmentally Disabled Residents	0.0	0.4	0.00	0.5	0.00	0.6	0.00	6.0	0.00
Mentally Ill Residents	46.5	40.3	1.15	38.6	1.20	36.6	1.27	33.6	1.38
General Medical Service Residents	14.1	17.9	0.79	18.9	0.74	19.7	0.71	21.1	0.67
Impaired ADL (Mean)	45.1	47.6	0.95	46.2	0.97	47.6	0.95	49.4	0.91
Psychological Problems	63.4	57.1	1.11	59.0	1.07	57.1	1.11	57.7	1.10
Nursing Care Required (Mean)	5.8	7.3	0.80	7.0	0.83	7.3	0.79	7.4	0.78